

TELECOPIER COVER SHEET

January 26, 2005

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To: Assistant Commissioner for Patents	From: Estella Pineiro Patent Administrator 818/493-2251
Attention: Examiner J. Foreman Art Unit: 3736 TECHNOLOGY CENTER 3700	ST. JUDE MEDICAL CRMD 15900 Valley View Court Sylmar, California 91392-9221
Telecopier: 703/872-9306	Telecopier: 818/362-4795
RE: Amendment and Request for Reconsideration Applic. No. 09/981,958 Filed: 10/16/2001 Docket No. A01P1073	Number of pages being sent: <u>18</u> (including cover page)

PLEASE DELIVER TO EXAMINER FRANCES P. OROPEZA, Art Unit 3762.

THE INFORMATION CONTAINED IN THIS TRANSMISSION IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE AND THOSE PROPERLY ENTITLED TO ACCESS TO THE INFORMATION AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL, AND/OR EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW. IF THE READER OF THIS TRANSMISSION IS NOT THE INTENDED OR AN AUTHORIZED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY UNAUTHORIZED DISTRIBUTION, DISSEMINATION, OR DUPLICATION OF THIS TRANSMISSION IS PROHIBITED. IF YOU HAVE RECEIVED THIS TRANSMISSION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE OR FACSIMILE. THANK YOU.

PATENT**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant:	Joseph J. Florio et al.	
Serial No.:	09/981,958	Examiner: J. Foreman
Filed:	10/16/2001	Art Unit: 3736
Docket No.:	A01P1073	
For:	SYSTEM, DEVICE AND METHOD FOR PLACING A BODY IMPLANTABLE LEAD IN THE CORONARY SINUS REGION OF THE HEART	

TRANSMITTAL LETTER, FEE AND CERTIFICATE OF MAILING

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Submitted herewith for filing are the following documents:

- ☒ Amendment and Request for Reconsideration
☒ Power of Attorney by Assignee...
☒ Transmittal Letter, Fee and Cert. of Mailing

CALCULATION OF FEES					
ITEM		NO. OF CLAIMS REMAINING AFTER AMENDMENT	NO. OF CLAIMS PREVIOUSLY PAID FOR	ADD'L CLAIMS FILED	LARGE ENTITY FEE
A	TOTAL CLAIMS FEE	10	20	0	X \$ 50
B	INDEPENDENT CLAIMS FEE**	2	3	0	X \$200
C	MULTIPLE- DEPENDENT				X \$ 360
D	EXTENSION OF TIME FEE — 1-mon: \$120; 2-mon: \$450; 3-mon: \$1,020; 4-mon: \$1,590; 5-mon: \$2,160				
E	ADDITIONAL FEES (i.e., Surcharge - Late Fee- Declaration; Petitions; Information Disclosure Statement; Terminal Disclaimer, etc.) Specify:				
F	TOTAL ADDITIONAL FEE** (ADD TOTALS FOR LINES A,B,C,D, and E)				
					\$0**

☒

Charge Deposit Account No. **16-0068**
the amount of

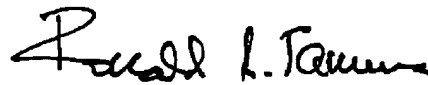
\$0**

**A copy of this letter is
enclosed.**

PATENT

- X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-0068
- X Any additional filing fees required under 37 CFR 1.16.
- X Any patent application processing fees under 37 CFR 1.17.
- X The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 16-0068
- X Any patent application processing fees under 37 CFR 1.17.
- X Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Respectfully submitted,

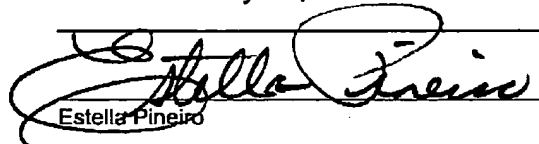
Date: 1/25/05

Ronald S. Tamura
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Attorney for Applicants

CUSTOMER NUMBER: 36802

I hereby certify that this correspondence is being facsimile transmitted to
the United States Patent and Trademark Office on:

January 26, 2005



Estella Pineiro

1/26/05
Date